

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C.20549

## FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D SECTION 4(6), AND/OR JNIFORM LIMITED OFFERING EXEMPTION

<del>-</del>	
	APPROVAL
OMB Number:	3235-0076
Expires:	April 30,2008
Estimated aver	rage burden
hours per respo	onse16.00

SEC USE ONLY				
Prefix	Serial			
DATE	RECEIVED			
	1			

	186 UNIFORM LIMITED OFFERING EXEM	DATE RECEIVED
	me of Offening (Check if this is an amendment and name has changed, and india M Futures L.P.	cate change.)
	ng under(Check box(es) that apply):	Hule 506 Section 4(6) DLOE
	A.BASIC IDENTIFICATION	DAYA
	nter the information requested about the issuer	OCT 21
	me of issuer( M Check if this is an amendment and name has changed, and ind M Futures L.P.	
Add	dress of Executive Offices (Number and Street, City, State, Zip Code)	THOMSON: Telephone Number(Inc. MAN Tree Code)
330	Madison Avenue New York NY 10017	212-407-4600
	ress of Principal Bueiness Operations (If different from Executive Offices) mber and Street, City. State, Zlp Code)	Telephone Number(Including Area Code)
Brie	of Description of Business: GAM Futures L.P. is an Investment vehicle which and related instruments.	will trade in a diverse group of commodity interest
Туре	e of Business Organization    corporation   X   limited partnership, already formed   other (p   business trust   limited partnership, to be formed	lease specify):
	MONTH YEAR	07081517
Actu	ual or Estimated Date of Incorporation or Organization:	X Actual Estimateo
Juris	sdiction of incorporate of Organization: (Enter two-letter U.S. Postal Service abbrev CN for Canada; FN for other foreign jurisdiction	
GEN	IERAL INSTRUCTIONS	
	ERAL; I Must File: All lesuers making an offering of securities in rellance on an exemption under Regulation D	or Section 4(6), 17 CFR 230,501 et seq. or 15 U.S.C 77 G(5).
on th	in to File: A notice must be filed no later then 16 days after the first sele of securities in the offering. A he earlier of the date it is received by the SEC at the address given below or, if received at that address stered or certified mell to that address.	
Whe	re to File: U.S. Securities and Exchange Commission, 460 Fifth Street, N.W., Washigton, D.C. 20549.	
	les Required: Five (5) copies of this notice must be tiled with the SEC, one of which must be manusity and copy or bear typed or printed signatures.	eigned. Any Copies not manuity algred must be photocopies of the menually
	rmetion Required: A new Ming must contain all information requested. Amendments need only report in rested in Part C, and any meterial changes from the information pravidually supplied in Paris A and B. F	
Filtro	g Fee: There is no federal filing fee.	
form.	e: notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales on the uniform selection of the sales of the	ere seles are to be, or have been made. If a State requires the payment of a f
	ATTENTION	
	Failure to file notice in the appropriate states will not result in a loss of the fitte appropriate faderal notice will not result in a loss of an available state expredicated on the filing of a federal notice.	
1	Persons who respond to the collection of information of	contained in this form are not

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

distance to the state of the party of the state of	rang simbol ng kathagalika	the think here	A STATE OF THE STA	THE ST	
Enter the information req     L Each promoter of the	uested for the foll issuer, if the Issu	lowing: Jer has been organized wit			
<ol> <li>Each beneficial owner or more of a class of</li> </ol>	r having the power equity securities	er to vate or dispose, or dir of the Issuer;	act the vote or disposition of, 10%		
<ol> <li>Each executive officer partners of partnershi</li> </ol>	r and director of c p issuers; and	orporate lesuers and of co	rporate general managing		
lv. Each general and me	naging partner o	f partnership isauers.			
	<del></del>	_			
Check Box(es) that apply:	Promoter	Beneficial Owner	Executive Officer Director		General and /or Managing Partner
Full Name(Last name first, it	f Individual)				
GAM USA Inc.					
Business or Residence Add	ress	(Number and S	treet, City, State , Zip Code)		
330 Madison Avenue, New Yo	rk NY 10017				
Check Box(es) that apply:	Promoter	Beneficial Owner	Executive Officer Director		General and /or Managing Partner
Full Name(Last name first, if	Individual)				
Dursht Kenneth					
Business or Residence Addr	ess	(Number and St	reet, City,State ,Zip Code)		
330 Madison Avenue, New Yo	rk NY 10017				
Check Box(es) that apply:	Promoter	Beneficial Owner	Executive Officer Director		General and /or Managing Partner
Full Name(Last name first, if	Individual)	· · · · · · · · · · · · · · · · · · ·			
Glagar Joseph					
Business or Residence Addr	986	(Number and St	reet, City,State ,Zip Code)		<del></del>
330 Madison Avenue, New Yor	rk NY 10017				
		<u></u>			
Check Box(es) that apply:	Promoter	Beneficial Owner	Executive Officer Director		General and /or Managing Partner
Full Name(Last name first, if	Individual)		······································		
Riggin Teresa					
Business or Residence Addr	ess	(Number and St	reet, City,State ,Zip Code)		<u> </u>
330 Madison Avenue, New Yor	k NY 10017				

Check Box(es) that apply:	Promoter	Beneficial Owner	Executive Officer Director	General and /or Managing Partner
Cull Named and name at the	finalistat - 0			 
Full Name(Last name first, i	r individual)			
Harte Francis				 
Business or Residence Add	ress	(Number and S	treet, City,State ,Zip Code)	
330 Madison Avenue, New Yo	ork NY 10017			 
Check Box(ee) that apply:	Promoter	Beneficial Owner	Executive Officer C Director	General and /or Managing Partner
Full Name(Last name first, it	Individual)			 
McPhee Jalme				
Business or Residence Add	ress	(Number and S	reet, City,State ,Zip Code)	
330 Medison Avenue, New Yo	rk NY 10017			 
Check Box(es) that apply:	Promoter	Beneficial Owner	Executive Officer Director	General and /or Managing Partner
Full Name(Last name first, if	Individual)			
Hovencamp Kristin	·			
Business or Residence Add	ess	(Number and Si	reet, City,State ,Zip Code)	
330 Madison Avenus, New Yo	rk NY 10017			 
Check Box(es) that apply:	Promoter	Beneficial Owner	Executive Officer Director	General and /or Managing Partner
Full Name(Last name first, if	Individual)	<del></del>		·
Brodheim Deborsh				
Business or Residence Addr	ess	(Number and St	reet, City,State ,Zip Code)	
330 Madison Avenue, New Yo	rk NY 10017			

Line and the same that the same and the same					
		Yes	No		
Has the Issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, if filing under ULOE.					
2. What is the minimum investment that will be accepted from any individual?	\$	\$ 1,000,0	000.00		
3. Does the offering permit joint ownership of a single unit?		Yes	No		
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchases in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and for with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.					
Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)					
Name of Associated Broker or Dealer			<del></del>		
States In Which Person Listed has Solicited or Intends to Solicit Purchasers			<del> </del>		
Check "All States or check individual States}		All State	S		
[AL] [AK] [AZ] [AA] [CA] [CO] [CT] [DE] [DC] [FL] [GA]	(HI)	[(O)			
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN]	(MS)	[MO]			
[MI] [NE] [NA] [NA] [NA] [NA] [NA] [NA] [NA] [NA	(OR)	[PA]			
(HI)   (SC)   (SD)   (TN)   (TX)   (UT)   (VT)   (VA)   (WA   (WV   (WI)	ĺMA	[PA]			

	San Property and Company of the Comp			7.5	The state of the
Enter the aggregate offering price of	securities included in this offering and the total am	nount aiready	sold.		
Indicate in the columns below the an	o". If the transaction is an exchange offering, check mounts of the securities offered for exchange and a	this box	and		
	a serior of the cooking and a	niegoy excitat	igeo,		
Type of Security			Aggregate offering price	Ar	nount Aiready Sold
					3010
Debt		\$		<b>\$</b>	
	***************************************	¥ \$		•	
Commo		3	<del></del>	\$ .	
		_			
Partnership Interests	g warrants)	\$		\$_	
	,	\$	\$999,999.000.00	\$_	\$74,141,997.79
Other(Specify	)	\$		\$_	
Total	***************************************	\$	\$999,999,000.00	\$_	\$74,141,997.79
Answer also in Appen	dix, Column 3, if filing under ULOE		<del></del>	_	
2.Enter the number of accordited and	non-accredited investors who have purchased secu				
nis offering and the aggregate dollar a	amounts of their purchases. For offering under Ru	de	Number of		Aggregate
ove,indicate the number of persons wh	no have purchased securities and the aggregate do lines. Enter "0" if answer is "none" or "zero".	xiar .	investors		Dollar Amount
					of Purchases
Accredited Investors			141	\$	\$74,141,997.79
Non-accredited Investors				s	
	504 only)			_	
	ndix, Column 4, if filing under ULOE			_ °	
	lule 504 Or 505, enter the Information requested for	rational village			
<ul> <li>sold by the issuer, to date, in offering</li> </ul>	gs of the types indicated, in the twelve(12) months i	prior to the			
TIFET SAJE OF SECURTIES IN this offering.	. Classify securities by type listed in Part C - Ques	tion 1,	Type of		Dollar Amount
Type of offering			securitie		Sold
Rule 505					6
Regulation A				`	
Regulation 504					<u> </u>
Total				9	S
a. Fumish a statement of all expense:	s in connection with the Issuance and distribution o	of the securities	es .		
n this offering. Exclude amounts relation	ing solely to organization expenses of the issuer. T	ne informatio	n		
stimate and check the box to the left of	ngencies. If the amount of an expenditure is not kn of the estimate.	iown, rumish	יש		
Transfer Agent's Fees				K)	\$0.00
Printing and Engraving Costs					\$5,000.00
•					\$2,000.00
Legal Fees					
Accounting Fees					\$0.00
Engineering Fees					\$0.00
Sales Commissions (specify finde	ers' fees separately)	****		<u> </u>	\$0.00
Other Expenses(Identify)					\$0.00
Total					\$7,000.00

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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS					
Question 1 and total expenses furnished	gregate offering price given in response to Part Ced in response to Part Ced in response to Part Ceduestion 4.a. This differuer."	rence is		\$ .	\$999,992,000.00
used for each of the purposes shown. I estimate and check the box to the left of	ed gross proceeds to the issuer used or proposed f the amount for any purpose is not known, furnish f the estimate. The total of the payments listed made issuer set forth in response to Part C- Question	n an ust			
			Payments to Officers, Directors, & Affillates		Payments to Others
Salaries and fees		<b>K</b> ]\$	\$0.00	<b>F</b> ] \$	\$0.00
Purchase of real estate		· 🔽 \$	\$0.00	<u>F</u> \$	\$0.00
Purchase,rental or leasing and ins	tallation of machinery and equipment	<u> </u>	\$0.00	<b>F</b> \$	\$0.00
Construction or leasing of plant bu	ildings and facilities	<u> </u>	\$0.00	<b>河</b> \$	\$0.00
	iding the value of securities involved in schange for the assets or securities of				
another issuer parsuant to a mergi	<i></i>	K   \$	\$0.00	K \$	\$0.00
Repayment of indebtedness		<b>K</b> \$	\$0.00	<b>×</b> \$	\$0.00
working capital		<b>K</b> \$	\$0.00	<b>K</b> \$	\$999,992,000.00
Other(specify):					
		<b> </b>	\$0.00	<b>₹</b> 7 \$	\$0.00
Column Totals		₩ \$	\$0.00	<b> </b> \$	\$999,992,000.00
Total Payments Listed(column total	als added)	_	<b>×</b> \$	\$ 999	0,992,000.00
<del></del>	D.FEDERAL SIGNATURE	-			
Rule 505, the the following signature co	to be signed by the undersigned duly author onstitutes an undertaking by the issuer to fur staff, the information furnished by the issue	nish to the	U.S. Securities a	and Exc	change
Issuer(Print or Type) GAM Futures L.P.	Signature	Date /	0/17/07	7	
Name of Signer(Print or Type)	Title of Signer(Print or Type)				
Kenneth Dursht	General Counsel and Secretary				
	ATTENTION				
Intentional misstatements o	r omissions of fact constitute federal crin	ninal viola	tions. (See 18 U	.S.C.10	001.)

E. STATE SIGNATURE	
Is any party described in 17 CFR 230.262 presently subject to any disqualification provisions of such rule?	Yes No

See Appendix, Column 5, for state response

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D(17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption(ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer(Print or Type) GAM Futures L.P.	Signature & Malf	Date /0/17/07
Name(Print or Type)	Title(Print or Type)	
Kenneth Dursht	General Counsel and Secretary	

## Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

END